<b>3</b>	Case 1:04-cv-01542-GMS Document 110 Filed 06/29/2007 Page 1 of 20 IN THE UNITED STRICES DISTRICT COURT
	DISTRICT OF DELAWARE
	KEVIN C. BRATHWAITE
A Mary Commission of Mary September 1991 of the Special Special September 1991 of the Special Se	Plaintiff
	V. 1C.A.#04-1542-G.M.S.
	MARCEllo Rispoli, et. Al 1
	defendants
	JUN 2.9 2007
	U.S. DISTRICT COURT DISTRICT OF DELAWARE
	BP scarned
	MOTION FOR INJUCTIVE RELIEF
	COMES NOW, THE Plaintiff, Kevin
	C. Brathwaite, requesting that this
	to have his injuries properly treated.
	to have his injuries properly treated. To support this Motion, this
	Plaintiff offers the Following:
to 11 - control of the control of th	1. This Plaintiff has been Suffering
	direct result of the ASSAULT
	direct result of the ASSAULT that took place on october, 9th,
Martine seminoralistica erroriante escribilitat e en en entreparte describations	2004

- 2. Over the past two and a half
  years this Plaintiff has Made
  Numerous attempts, by way of
  Sick Call request, grievances, and
  letters to have his injuries
  properly treated.
- 3. This Plaintiff has been told that he is in need of a root CANA! to correct the damage that was done to his Front teeth. and that the only way he could get the root CANA!, was that it had to be approved by the Warden.
- 4. This Plaintiff was Seen by the dentist on June, 5th, 2006 And was told that the injury had gone untreated for so long that it has developed an infection.
- 6. ON September, 25th 2006 this

  Plaintiff was seen by the dentist

  And told that the infection on

  his Front teeth Still exist, but

  Authorization for the root CANAL

  Still has'nt been granted.

- 7. ON OF About, JANUARY, 3<sup>cd</sup>, 2007

  DR. KIONKE told this Plaintiff

  that the Warden Still had Not
  Authorized the roof CANAL.
- 8. AS A result of this Assault this Plaintiff's fillings have Also been damaged.
- 9. OVER A YEAR AGO ON JUNE, 8 , 2006

  HIS PLAINTIFF FINALLY HAD A

  GRIEVANCE HEARING AND HIS GRIEVANCES

  Were denied.
- 10. AFter Appealing the grievance boards decision to deny the grievances, and months later on March, 12, 2007, the outside grievance Committee granted the Plaintiff's Appeal and upheld the grievance request made by this Plaintiff. See, attached exhibits.

11. None of the injuries And damage on this PlaintIFFS Front teeth or Fillings is of Any FAULT OF his.

Therefore, this Plaintiff respectfully request that this honorable courf grant this Motion for injuctive relief. And order that he receive A proper root CANAL AND ANY other Cosmetic procedure to repair All damage due to being untrented.

> EVIN C. BrAthwaite 1/8/ PAddock Rd. SMYTNA DE. 19977

DATEd: June, 27th 2007

DEPARTMENT OF CORRECTION
Bureau of Prisons
245 McKee Road
Dover, Delaware 19904

March 21 308 007

17-BL-8

Inmate BRATHWAITE KEVIN C SBI # 00315294 DCC Delaware Correctional Center SMYRNA DE, 19977

Dear KEVIN BRATHWAITE:

We have reviewed your Grievance Case # 46948 dated 06/08/2006.

Based upon the documentation presented for our review, we uphold your appeal request.

Accordingly, there is no further issue to mediate nor Outside Review necessary as provided by BOP Procedure 4.4 entitled "Inmate Grievance Procedure", Level III appeals.

Sincerely,

Richard Kearney Bureau Chief

EXhibit-A

Document 110

Filed 06/29/2007

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DCC Delaware Correctional Center Smyrna Landing Road **SMYRNA DE, 19977** Phone No. 302-653-9261

Date: 03/13/2007

**GRIEVANCE REPORT** 

OFFENDER GRIEVANCE INFORMATION

Offender Name: BRATHWAITE, KEVIN C

SBI#

: 00315294

Institution

: DCC

Grievance # : 46948 Grievance Date : 06/08/2006

: Individual

Category

Status

: Resolved

Resolution Status: Level 3

Resol. Date

: 03/13/2007

Grievance Type: Health Issue (Medical)

**Incident Date** 

: 06/08/2006

Incident Time:

**IGC** 

: Merson, Lise M

Housing Location: Bldg 17, Lower, Tier B, Cell 8, Single

OFFENDER GRIEVANCE DETAILS

Description of Complaint: Inmate claims: My front teeth have developed an infection and the dentist told me that I need a

root canal which can only be approved by the DOC.

Remedy Requested

: That I be given a root canal to properly treat the infection in my teeth.

INDIVIDUALS INVOLVED

TIONAL GRIEVANCE INFORMATION

Medical Grievance: YES

Date Received by Medical Unit: 06/20/2006

Investigation Sent: 06/20/2006

Investigation Sent To

: Rodweller, Deborah

**Grievance Amount:** 

Page 7 of 20 Date: 03/13/2007

Case 1:04-cv-01542-GMS Document 110 Filed 06/29/2007
Delaware Correctional Center
Smyrna Landing Road
SMYRNA DE, 19977
Phone No. 302-653-9261

INF	-ORMAL RESOLUTION
OFFEN	NDER GRIEVANCE INFORMATION
ender Name : BRATHWAITE, KEVIN C evance # : 46948 tus : Resolved evance Type: Health Issue (Medical)	SBI# : 00315294 Institution : DCC  Grievance Date : 06/08/2006 Category : Individual Inmate Status : Incident Date : 06/08/2006 Incident Time :
: Merson, Lise M	Housing Location :Bldg 17, Lower, Tier B, Cell 8, Single
	INFORMAL RESOLUTION
estigator Name : Rodweller, Deborah	Date of Report 06/20/2006
estigation Report : o documentation in chart r placed on op list for fillings Approx 4 mth waiting list a Next level.	
son for Referring:	
estigator Name : Eller, Gail	Date of Report 11/15/2006
estigation Report : Inmate instructed to put in front teeth.	n a sick call request for dental and be specific as to questionable infection
son for Referring:	
8	
fender's Signature:	
ate :	
itness (Officer) :	

[] Forward to RGC

[] Offender Signature Captured

Document 110

Filed 06/29/2007

09/27/2006

Page 8 of 20 Date: 03/13/2007

DCC Delaware Correctional Center Smyrna Landing Road SMYRNA DE, 19977 Phone No. 302-653-9261

GRIEVANCE INFORMATION - IGC									
		OFFENDE	R GRIEVANCE II	IF C	DRMATION				
Grievance # Status	ne: BRATHWAITE, KEVII : 46948 : Resolved pe: Health Issue (Medical : Merson, Lise M		SBI# Grievance Date Resolution State Incident Date Housing Location	; us :	06/08/2006	<b>S</b>	Category Inmate Status Incident Time	:	
			IGC						
Medical Prov	ider:		Date Assigned						
Comments:									•
1									
[x] Forward	to MGC	] Forwa	rd to Medical Pro	viv	der []	! '	Warden Notifie	d	

Date Forwarded to MGC:

**Date Offender Signed** 

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Filed 06/29/2007

Page 9 of 20 Date: 03/13/2007

DCC Delaware Correctional Center Smyrna Landing Road **SMYRNA DE, 19977** Phone No. 302-653-9261

# **GRIEVANCE INFORMATION - Appeal**

OFFENDER GRIEVANCE INFORMATION

Offender Name: BRATHWAITE, KEVIN C

SBI# : 00315294 : DCC

Grievance #

: 46948

Grievance Date : 06/08/2006

Status

: Individual

: Resolved

Resolution Status: Level 3

Inmate Status:

Grievance Type: Health Issue (Medical)

**IGC** 

: Merson, Lise M

the state of the s

Incident Date : 06/08/2006 Housing Location : Bldg 17, Lower, Tier B, Cell 8, Single

Incident Time:

Institution

Category

APPEAL REQUEST

Appeal received 14 November 2006.

Inmate states: The damage that was done to my front teeth is of no fault of mine. An infection has developed that requires a root canal. This problem has been ongoing since Oct., 9th 2004, the dentist told me that the only way I can get a root canal is if it gets approved by the DOC. The infection on my front teeth seems to be getting worse. So at this time I am requesting that my front teeth be repaired and that I get a root canal as soon as possible.

#### REMEDY REQUEST

Smyrna Landing Road **SMYRNA DE, 19977** Phone No. 302-653-9261

# **GRIEVANCE INFORMATION - BGO**

# OFFENDER GRIEVANCE INFORMATION

Offender Name: BRATHWAITE, KEVIN C

SBI#

: 00315294

Institution

Grievance #

: 46948

Grievance Date: 06/08/2006

Category

: Individual

Status

: Resolved

Resolution Status: Level 3

Inmate Status:

Grievance Type: Health Issue (Medical)

: Merson, Lise M

Incident Date : 06/08/2006 Incident Time:

Housing Location: Bldg 17, Lower, Tier B, Cell 8, Single

REFERRED TO

Due Date: 12/05/2006

Referred to: Person

Name: Welch, James

#### Type of Information Requested:

Grievant requests root canal & treatment for infection.

# Response to Information Requested:

Date Received: 11/17/2006

Decision Date: 02/06/2007

Vote: Uphold

Comments

Grievant needs dental care (fillings and root canal).

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Date: 03/13/2007

**DCC Delaware Correctional Center** Smyrna Landing Road **SMYRNA DE, 19977** Phone No. 302-653-9261

# **GRIEVANCE INFORMATION - Bureau Chief**

OFFENDER GRIEVANCE INFORMATION

Offender Name: BRATHWAITE, KEVIN C

SBI# : 00315294 Institution

: DCC

Grievance #

: 46948

Grievance Date : 06/08/2006

Category : Individual

**Status** 

: Resolved Grievance Type: Health Issue (Medical) Resolution Status: Level 3

Inmate Status:

**IGC** 

: Merson, Lise M

**Incident Date** : 06/08/2006

Housing Location: Bldg 17, Lower, Tier B, Cell 8, Single

Incident Time:

Decision Date: 03/12/2007

Vote: Uphold

Comments

# **GRIEVANCE INFORMATION - MGC**

## OFFENDER GRIEVANCE INFORMATION

Offender Name: BRATHWAITE, KEVIN C

SB!#

00315294

Institution

: DCC

Grievance #

: 46948

Grievance Date: 06/08/2006

Category : Individual

**Status** 

: Resolved

Resolution Status: Level 3

Inmate Status:

Grievance Type: Health Issue (Medical)

**Incident Date** : 06/08/2006 Incident Time:

**IGC** 

: Merson, Lise M

Housing Location: Bldg 17, Lower, Tier B, Cell 8, Single

Date Received: 09/27/2006

Date of Recommendation: 11/16/2006

	GRIEVANCE COMMITTEE MEMB	ERS:
Person Type	SBI# Name	Vote
Staff Staff Staff	Eller, Gail	Deny
Staff	Branch, Adriene	Deny
Staff	Gordon, Oshenka	Deny
Staff	McCreanor, Michael	Abstain

#### VOTE COUNT

Uphold: 0

Deny: 3

Abstain:1

TIE BREAKER

Vote

Name RECOMMENDATION

Hearing held Monday 13 November 2006.

Deny: Submit a sick call request for the dentist about? infection in front teeth.

DEPARTMENT OF CORRECTION
Bureau of Prisons
245 McKee Road
Dover, Delaware 19904

March 12, 308007

17, BL-8

Inmate BRATHWAITE KEVIN C SBI # 00315294 DCC Delaware Correctional Center SMYRNA DE, 19977

**Dear KEVIN BRATHWAITE:** 

We have reviewed your Grievance Case # 46949 dated 06/08/2006.

Based upon the documentation presented for our review, we uphold your appeal request.

Accordingly, there is no further issue to mediate nor Outside Review necessary as provided by BOP Procedure 4.4 entitled "Inmate Grievance Procedure", Level III appeals.

Sincerely,

Richard Kearney Bureau Chief

EXhibit - B

Document 110

Filed 06/29/2007

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Date: 03/13/2007

**DCC Delaware Correctional Center** Smyrna Landing Road **SMYRNA DE, 19977** Phone No. 302-653-9261

# **GRIEVANCE REPORT**

OFFENDER GRIEVANCE INFORMATION

Offender Name: BRATHWAITE, KEVIN C

SBI# : 00315294 Institution : DCC

Grievance #

: 46949

Grievance Date : 06/08/2006

Category : Individual

**Status** 

Resol. Date

: Resolved

Resolution Status: Level 3

: 03/13/2007

Grievance Type: Health Issue (Medical)

Incident Date : 06/08/2006 Incident Time:

: Merson, Lise M

Housing Location: Bldg 17, Lower, Tier B, Cell 8, Single

OFFENDER GRIEVANCE DETAILS

Description of Complaint: Inmate claims: I was told today that I would have to wait many months to have three teeth filled. If

I have to wait that long, then by the time I am called for fillings the teeth will be even more

decayed.

Remedy Requested

: That I get dental treatment ASAP.

INDIVIDUALS INVOLVED

SBI#

Name

ADDITIONAL GRIEVANCE INFORMATION

Medical Grievance: YES

Date Received by Medical Unit: 06/20/2006

Investigation Sent: 06/20/2006

**Investigation Sent To** 

: Rodweller, Deborah

Grievance Amount:

Case 1:04-cv-01542-GMS Document 110 Filed 06/29/2007
DCC Delaware Correctional Center
Smyrna Landing Road
SMYRNA DE, 19977
Phone No. 302-653-9261

Page 14 of 20 Date: 03/13/2007

# INFORMAL DESCRIPTION

INFORMAL RESOLUTION				
OFFEND	R GRIEVANCE INFORMATION			
Offender Name: BRATHWAITE, KEVIN C Grievance # : 46949 Status : Resolved Grievance Type: Health Issue (Medical) IGC : Merson, Lise M	SBI# : 00315294 Institution : DCC Grievance Date : 06/08/2006 Category : Individual Resolution Status: Level 3 Inmate Status : Incident Date : 06/08/2006 Incident Time : Housing Location : Bldg 17, Lower, Tier B, Cell 8, Single			
	FORMAL RESOLUTION			
Investigator Name : Rodweller, Deborah	Date of Report 06/20/2006			
Investigation Report : Only i sick call in chart dated placed on 4 mth waiting list f Reason for Referring:	or fillings according to Dr Zimble.			
Investigator Name : Eller, Gail	Date of Report 11/15/2006			
Investigation Report : Inmate is on the dental list ar	nd will be notified when the time arrives to be seen.			
Reason for Referring:				
Offender's Signature:				
Date :				

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Page 15 of 20 Date: 03/13/2007

Smyrna Landing Road SMYRNA DE, 19977 Phone No. 302-653-9261

**GRIEVANCE INFORMATION - IGC** 

<u> </u>		
54.7. \$ 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	OFFENDER GRIEVANCE INFORMATION	
Offender Name: BRATHWAITE, KEVI	N C SBI# : 00315294	Institution : DCC
Grievance # : 46949	Grievance Date : 06/08/2006	Category : Individual
Status : Resolved	Resolution Status: Level 3	Inmate Status :
Grievance Type: Health Issue (Medica	) Incident Date : 06/08/2006	Incident Time :
IGC : Merson, Lise M	Housing Location: Bldg 17, Lowe	er, Tier B, Cell 8, Single
	IGC	
Medical Provider:	Date Assigned	
Comments:		
[x] Forward to MGC	[ ] Forward to Medical Provider [ ]	Warden Notified
[] Forward to RGC	Date Forwarded to MGC: 09/27/2006	
[ ] Offender Signature Captured	Date Offender Signed :	
		•

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Filed 06/29/2007

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**DCC Delaware Correctional Center** Smyrna Landing Road **SMYRNA DE, 19977** Phone No. 302-653-9261

**GRIEVANCE INFORMATION - Appeal** 

OFFENDER GRIEVANCE INFORMATION

Offender Name: BRATHWAITE, KEVIN C

: 00315294

Institution : DCC

Grievance # : 46949 Grievance Date : 06/08/2006

Category : Individual

**Status** : Resolved Resolution Status: Level 3

Inmate Status:

Grievance Type: Health Issue (Medical) IGC : Merson, Lise M

Incident Date : 06/08/2006

Incident Time:

Housing Location: Bldg 17, Lower, Tier B, Cell 8, Single

APPEAL REQUEST

Appeal received 14 November 2006.

inmate states: Over the past two (2) years I have submitted numerous sick call request to have my fillings replaced and nothing has been done. On Sept, 25th I was called to the dentist office and she didn't even examine my teeth or do x-rays or anything, all she did was ask me to sign off on a grievance. When I refused to sign off, she told me I would not be seen for Nine (9) to twelve (12) months. The damage to my teeth is only getting worse and it's already been over two (2) years.

#### REMEDY REQUEST

Document 110

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**DCC Delaware Correctional Center** Smyrna Landing Road **SMYRNA DE, 19977** Phone No. 302-653-9261

# **GRIEVANCE INFORMATION - BGO**

OFFENDER GRIEVANCE INFORMATION

Offender Name: BRATHWAITE, KEVIN C

SBI# : 00315294 Institution : DCC

Grievance #

46949

Grievance Date : 06/08/2006

Category

: Individual

Status : Resolved Resolution Status: Level 3

Inmate Status:

Grievance Type: Health Issue (Medical)

**Incident Date** : 06/08/2006 Incident Time:

**IGC** 

: Merson, Lise M

Housing Location: Bldg 17, Lower, Tier B, Cell 8, Single

REFERRED TO

Due Date: 12/05/2006

Referred to: Person

Name: Welch, James

Type of Information Requested:

Grievant reports elongated delay in receiving dental services.

Response to Information Requested:

Date Received: 11/16/2006

Decision Date: 02/06/2007

Vote: Uphold

Comments

Grievant needs fillings. His sick call is dated 5/22/06



Smyrna Landing Road **SMYRNA DE, 19977** Phone No. 302-653-9261

# **GRIEVANCE INFORMATION - Bureau Chief**

OFFENDER GRIEVANCE INFORMATION

Offender Name: BRATHWAITE, KEVIN C

SBI# : 00315294 Institution : DCC

Grievance # : 46949

Grievance Date : 06/08/2006 Category : Individual

**Status** 

: Resolved

Resolution Status: Level 3

Inmate Status:

Grievance Type: Health Issue (Medical)

Incident Date : 06/08/2006

Incident Time:

**IGC** : Merson, Lise M

Housing Location: Bldg 17, Lower, Tier B, Cell 8, Single

DECISION

Decision Date: 03/12/2007

Vote: Uphold

Comments

# **GRIEVANCE INFORMATION - MGC**

# OFFENDER GRIEVANCE INFORMATION

Offender Name: BRATHWAITE, KEVIN C

SBI#

: 00315294

Institution : DCC

: Individual

Grievance #

: 46949

Grievance Date: 06/08/2006

Category

Status

**IGC** 

: Resolved

Resolution Status: Level 3

Inmate Status:

Grievance Type: Health Issue (Medical)

: Merson, Lise M

**Incident Date** : 06/08/2006 Incident Time :

Housing Location: Bldg 17, Lower, Tier B, Cell 8, Single

MGC

Date Received: 09/27/2006

Date of Recommendation: 11/16/2006

	GRIEVANGE COMMITTEE MEMBE	RS
Person Type	SBI# Name	Vote
Staff	Eller, Gail	Deny
Staff	Gordon, Oshenka	Deny
Staff	Branch, Adriene	Deny
Staff	McCreanor, Michael	Abstain

### VOTE COUNT

Name

RECOMMENDATION

Uphold: 0

Deny: 3

Abstain :1

Person Type

SBI#

TIE BREAKER

Vote

Hearing held Monday 13 November 2006. Deny: Inmate on dental list - They will schedule inmate as his time arrives.

# Certificate of Service

T Kevin C. Brathwaite, States

that I have caused a copy of

the attached Motion for injuctive

relief to be mailed to the following

party by Way of U.S. Postal Service.

Ofhelia Waters, Esq Atty Gen Office 820 N. French St. Wilmington DE-19801

KEVIN C- Brathwaite
1/8/ Baddock RdSMYTNA DE19972

IM. KEVIN C. BOATHWAITE

DELAWARE CORRECTIONAL CENTER

1181 PADDOCK ROAD SMYRNA, DELAWARE 19977





U.S. DISTRICT COUFT OFFICE OF The CleCK 844 N. KING ST-WILMINGTON DE